The Philippine Health Situation at a Glance

BY CANDY DIEZ

Cheaper medicines?

ONE IMPORTANT development in the promotion and protection of the right to health of Filipinos is the passage of the Cheaper Medicines Act of 2008.

Its passage was not an easy one. Right from the start, the bill met with stiff resistance from multinational drug companies which exerted all efforts to block its passage, especially during the 13th Congress.

After several public hearings and consultations, salient points of the bill grew to include more than just the Intellectual Property amendments. The bill contained amendments to the Generics Act and pharmacy law. The establishment of a drug price regulation was also included along with a provision to strengthen the Bureau of Food and Drugs (BFAD).

During the 14th Congress, the House version of the bill again faced stiff hurdles. Some of its provisions were not exactly palatable to certain sections within and beyond the halls of the lower house. The Drug Price Regulation vs. IP amendments debate was consistently drowning all other issues on the Cheaper Medicines bill in the first stages of the hearings by the House Committee on Trade and Industry. Some legislators viciously attacked the IP amendments, alleging
that the amendments will not really translate into affordable medicines.

The Philippine Medical Association (PMA) focused its attacks on the amendments to the Generics Act. The amended provision mandates for prescribing medicine in its generic name only, with no brand name appearing in any part of the prescription pad. This provision seeks to promote the use of generic drugs while preventing multinational pharmaceutical companies from using the prescription pads as a marketing tool for their branded drugs. The PMA went as far as threatening to conduct a nationwide Hospital Holiday, a boycott in which hospitals will refuse to accept patients once every week except for emergency cases. PMA conducted a nationwide motorcade to signify the doctors’ opposition against the “generics-only” prescription. PMA’s steadfast supporter was Senator Pia Cayetano, who opposed the provision during the bicameral deliberations and moved to scrap the generics only prescription from the final bicameral version of the bill.

The Department of Health, after a much-publicized show of support for the generics only prescription, retracted its recommendation. The DOH said that 54% of Filipinos are already purchasing generic medicines, so the need to amend this specific provision no longer merited urgency.

**Profit over patients**

Amid the hubbub surrounding the ‘generic name only prescription’ and even generic drug itself, public health advocates remained steadfast in their stance, challenging the PMA to renounce their profit-oriented view and put the patients’ best interest in mind.

The Office of the President saw the debate over the ‘generic name only prescription’ as the sole hindrance to the passage of the legislation. Thus, in May of 2008, President Arroyo publicly appealed to the bicameral committee members to drop the said provision to be able to pass a more important piece of legislation.

The provision was duly scrapped, but several advocate legislators
promised to raise the ‘generics name only prescription’ in an omnibus bill amending the Generics Act.

Despite the controversies hounding the public health legislation, the president finally signed the Cheaper Medicines Law on June 6, 2008. In its final form, the law is officially referred to as the Universally Accessible Cheaper and Quality Medicines Act of 2008. It amended the Intellectual Property Code of the Philippines, the Generics Act and the Pharmacy Law; contains certain provisions on drug price regulation and non-discrimination; and strengthens the Bureau of Food and Drugs.

**No condoms allowed**

In January this year, twenty residents of the city of Manila petitioned the Court of Appeals, seeking a temporary restraining order on Executive Order 003. EO 003 bans contraceptives in Manila, one of the most densely populated cities with a population of 1.7 million.

Signed in February 2000 by then-City Mayor Lito Atienza, the Executive Order upholds natural family planning and discourages artificial methods of contraception such as condoms, pills, intrauterine devices and surgical sterilization, among others.

In opposing EO 003, the petitioners invoked their right to healthcare and development, saying that the executive order violated reproductive rights.

**Church opposition**

In Quezon City meanwhile, the city council is in a toss-up with the Catholic church over an ordinance which supports the reproductive rights of its constituents.

The ordinance, which is being contested by Cubao Bishop Honesto Ongtioco, outlines a comprehensive population and reproductive health management policy that emphasizes the use of condoms and other contraceptives. The ordinance also mandates the inclusion of reproductive health and sex education in the curriculum of students
from Grade 5 up to high school.

Quezon City councilors immediately responded to allegations of the ordinance being “anti-life.” A number of councilors have clarified that the city’s population policy is consistent with the position of the church and that the city government remains anti-abortion, as specifically stated in the policy.

To ensure that the full impact of the policy will be felt by Quezon City residents, the city government has allotted P12 million for the implementation of the ordinance.

While the two cases have dealt with the issues within local jurisdictions, reproductive health rights activists have brought the issues to the national arena to expose the government’s insincerity in addressing population and health issues.

**Teenage moms**

An article in the Philippine Daily Inquirer notes the alarming rise of teen pregnancies in the country. In 2004, out of 1.7 million Filipino babies, almost 8 percent were born to mothers aged 15-19 years old, as shown by to the latest data from the National Statistics Office.

According to Benjamin de Leon, President of the Family Planning and Development, Inc. (FFPDI), almost ten percent of babies are born to a teenage mother. A study conducted by the Population Institute of the University of the Philippines shows that two of every five teenage pregnancies were unwanted. Among the young pregnant women, more than 46 percent have opted for induced abortion. Likhaan Foundation pointed out that while societal views have become more ‘liberated’ over the years, conservative views conditioned by Catholic teachings have prevented parents from discussing topics such as pre-marital sex, contraceptives and other forms of artificial birth control methods with their children.

These alarming figures have spurred various NGOs to push for the passage of a population management and reproductive health legislation.
The Reproductive Health bill

The Reproductive Health (RH) Bill seeks to ensure that information on and access to both natural and modern family planning methods are provided to the Filipinos. The bill further envisions an enabling environment where women and couples have the freedom of informed choice on the form of family planning they wish to adopt.

The pending legislation contains measures to strengthen the Population Commission (POPCOM) to encourage natural and modern family planning methods. POPCOM will also serve as the central body for a comprehensive and integrated reproductive health and population development program. Increasing the capacity of community-based volunteers through updated training on the reproductive healthcare service delivery is also included in the proposed bill as well as the employment of a number of midwives and other skilled attendants.

The bill also calls for the establishment of emergency obstetrics care, with adequate and qualified personnel for emergency obstetrics at the provincial and city levels.

Foaming and frothing at the mouth

Other provisions of the bill that have caused much foaming and frothing among religious fundamentalist and ‘pro-life’ groups include: the inclusion of contraceptives in the National Drug Formulary, making contraceptives essential medicines, and mandatory RH education for elementary and high school students (from Grade 5 to 4th Year High School). The bill also encourages an ideal family size of two children for every Filipino family, although it doesn’t call for any sanctions should couples opt for more than two children.

These provisions were strongly denounced by the Catholic church and other pro-life advocates, further blindsiding the discussion on reproductive health to a pro-life vs. anti-life debate. The Catholic church is vigorously blocking the passage of this legislation because of what it sees as “anti-life” provisions that
“threaten the sanctity of life.”

As early as the first half of the year, there were speculations on President Arroyo’s stance on the issue. With the overwhelming pressure from the Catholic church, the president appears to maintain a flexible stand, denouncing abortion and other artificial methods of family planning to appease the Church while reiterating the need to resolve the population problem through natural family planning when speaking among RH rights advocates.

The Reproductive Health Bill currently remains pending at the Senate Committee on Health and Demography.

**Doctor, doctor where are you?**

According to the Regional Coordinator of Pinoy MD Program Dr. Genelyn Herrera, at least 18 towns in Eastern Visayas have no doctors. This means that around 720,000 people in the region have no access to basic medical services.

Increasing migration of health professionals has largely depleted the pool of health practitioners, especially in the rural areas. Doctors and nurses are leaving the country at an ever faster rate. Dr. Melchor Rey Santos, president of the Philippine Medical Association (PMA), reported that of the 35,000 doctors in the PMA roster, 6,000 are now working abroad. Another 4,000 have opted to retrain and shift to the nursing profession, in preparation for an overseas job as a nurse.

According to Dr. Jaime Galvez-Tan, former secretary of the Department of Health, the number of doctors who have downgraded themselves into nurses has reached 9,000. Most of these doctors-turned-nurses leave for the US (about 6,000 of them, says Dr. Galvez-Tan). Another disturbing trend noted by Dr. Galvez-Tan is that 80 percent of these doctors-turned-nurses are government doctors.

The full impact of the migration is continuously being experienced in the rural areas such as those in Eastern Visayas towns where doctors are not available.
Public health spending

Gaps in the delivery of healthcare service can be traced back to inadequate public health spending by the government. In 2007, the government’s allocated budget for health was a meager P11.5 billion (compare this to the P54.3 billion share of the Department of National Defense).

Recent data from the World Health Organization show that the Philippines ranked 8th among 22 countries with high incidence of tuberculosis. Western Mindanao Health Director Aristides Tan says that in Western Mindanao alone, 4,000 people perish every year because of TB.

The first months of the year yielded an increase in the budget allocation for tuberculosis. The budget has been increased from P240 million in 2006 to P680 million for this year. The budget will compensate for TB medicines and laboratory supplies to be used by diagnostic centers in the Directly Observed Treatment Short course and other items such as monitoring, capacity building programs and advocacies.

Babies in detention

In 2007, the issue of detaining patients in hospitals for unsettled bills was heightened, with medical workers and hospitals threatening to go on “holiday” to protest the ban on hospital detention. In 2008, even babies were not spared from being detained in hospitals.

In February of 2008, the Chinese General Hospital and Medical Center detained six infants because their parents could not settle their hospital bills. Judge Cielito Mindaro-Grulla favored the plight of the infants when she granted the petition for writ of habeas corpus filed by the parents of the babies. Judge Grulla emphasized the protection of the newly born infants, arguing that they are being deprived of the opportunity of being reared by their parents.
It would seem that the State has been making efforts to recognize the people’s right to health, especially with the passage of the Cheaper Medicines law. Closer scrutiny would reveal that policy changes were brought about through the unceasing work of various civil society groups, particularly in the case of the Cheaper Medicines Law and the on-going work for the passage of the Reproductive Health Bill. The state’s attempts to realize the right to health of the people has only shown its vulnerability to the pressures of various interest groups, as shown in the ongoing hullabaloo over the RH bill and in the ‘generics name only prescription’ which slowed down deliberations on the Cheaper Medicines bill.

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